

ANNUAL MHSA REVENUE AND EXPENDITURE REPORT and ADJUSTMENT WORKSHEET COUNTY CERTIFICATION

County/City: Mono

Local Mental Health Director

Name: Robin K. Roberts

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Document for Certification:

MHSA Annual Revenue and Expenditure Report

FY: 2020/2021

I hereby certify¹ under penalty of perjury under the laws of the State of California that the attached Annual MHSA Revenue and Expenditure Report or Adjustments to Revenue or Expenditure Summary Worksheet is complete and accurate to the best of my knowledge.

Robin K. Roberts


Robin Roberts (Jan 14, 2022 12:52 PST)

Jan 14, 2022

Local Mental Health Director (PRINT)

Signature

Date

¹ Welfare and Institutions Code section 5899(a)

Mono FY 20-21 MHSA ARER DHCS_1820-Certification_Form

Final Audit Report

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